

## FAX RECEIVED



FEB 28 2003  
GROUP 1700

Suite 2800 1100 Peachtree St.  
Atlanta GA 30309-4530  
t 404 815 6500 f 404 815 6555  
www.KilpatrickStockton.com

direct dial 404 815 6389  
direct fax 404 541 3254  
KJohnson@KilpatrickStockton.com

February 27, 2003

## FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
AFTER FINAL TC1700 Ex. J. Rhee Group -Art Unit 1772	703-872-9311	U.S. Patent Office Washington, DC

Kristin L. Johnson 23  
FROM PAGES (WITH COVER)  
8493 I4060/205649  
REFERENCE NO CLIENT/MATTER NO.

PLEASE CALL 404 815 6497 IF YOU HAVE DIFFICULTY WITH THIS TRANSMISSION.

**CONFIDENTIALITY NOTE:**  
The information contained in this fax message is being transmitted to and is intended for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copy of this fax is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and destroy this fax message.

## COMMENTS

Please acknowledge receipt of the enclosed:

- 1) Transmittal Form PTO/SB/21
- 2) Fee Transmittal – no fee due
- 3) Amendment and Response to Office Action  
including Marked-up copy of amended claims  
pursuant to 37 C.F.R. 1.121(c )

## For:

Applicant(s): Daniel et al.  
Title: Orthogonally Ambiguous Carpet Tile  
Serial No.: 09/783,354  
Filing Date: February 14, 2001  
Attorney Docket No. IRC293 I4060/205649

TO BE COMPLETED BY KS OPERATIONS CENTER

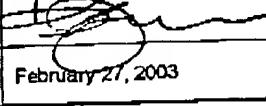
TRANSMISSION RECEIPT DATE/TIME:	
COMPLETED BY:	JOB CODE

OFFICIAL

FAX RECEIVED  
FEB 28 2003PTO/SB/21 (08-00)  
Approved for use through 10/31/2002. OMB 0851-0031U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.Please type a plus sign (+) inside this box → 

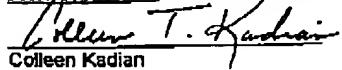
<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number 09/783,354
		Filing Date February 14, 2001
		First Named Inventor Daniel et al.
		Group Art Unit 1772
		Examiner Name Jane Rhee
Total Number of Pages in This Submission		Attorney Docket Number IRC293 I4060/205649

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Marked-up copy of amended claims pursuant to 37 C.F.R. 1.121(c)
Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kristin L. Johnson, Registration No. 44,807 Kilpatrick Stockton LLP
Signature	
Date	February 27, 2003

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this Response to Office Action and all documents referred to as enclosed are being facsimile transmitted to: U.S. Patent and Trademark Office on February 27, 2003, AFTER FINAL, fax no. 703-872-9311 at TC1700 (ART UNIT 1772).

  
Colleen Kadian

Approved for use through 10/31/2002. OMB 0551-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ 0)

Complete if Known

Application Number	09/783,354
Filing Date	February 14, 2001
First Named Inventor	Daniel, et al.
Examiner Name	Jane Rhee
Group / Art Unit	1772
Attorney Docket No.	IRC293 14060/205649

### METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money  Other  Non-Order

Deposit Account:

Deposit Account Number

11-0855

Deposit Account Name

KILPATRICK STOCKTON LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 740	201	370		Utility filing fee	
106 330	206	165		Design filing fee	
107 510	207	255		Plant filing fee	
108 740	208	370		Reissue filing fee	
114 160	214	80		Provisional filing fee	

SUBTOTAL (1)

(\$ 0)

#### 2. EXTRA CLAIM FEES

Total Claims	34	-46**	= 0	X 18	= 0	Extra Claims	Fee from below	Fee Paid
Independent Claims	1	-9**	= 0	X 84	= 0			
Multiple Dependent				X	= 0			

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103 18	203	9		Claims in excess of 20	
102 84	202	42		Independent claims in excess of 3	
104 280	204	140		Multiple dependent claim, if not paid	
109 84	209	42		-- Reissue independent claims over original patent	
110 18	210	9		-- Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$ 0)

\*\*or number previously paid, if greater; For Reissues, see above

### FEE CALCULATION (continued)

3. ADDITIONAL FEES	Large Entity	Small Entity	Fee Description	Fee Paid
	Fee Code	Fee Code		
	Fee (\$)	Fee (\$)		
105	130	205	65 SurchARGE - late filing fee or oath	
127	50	227	25 SurchARGE - late provisional filing fee or cover sheet	
139	130	130	130 Non-English specification	
147	2,520	147	2,520 For filing a request for reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	65 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	158	1,510 Petition to Institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,280	241	840 Petition to revive - unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	480	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CFR 1.17 (a)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	800	169	900 Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0)

SUBMITTED BY		Complete if applicable			
Name (Print/Type)	Signature	Registration No. Attorney/Agent	44,807	Telephone	404-815-6389
Kristin L. Johnson				Date	February 27, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.